



**ISSUE
POLITICAL INQUIRY FORM
KCBS
LOS ANGELES, CA**

Non-Federal

Special Election: ☐

Primary Window: ☐

General Election: ☒

Out of Window: ☐

RECORD OF REQUEST: Broadcast Time/Flight Dates:

ISSUE RATES 4Q12

NAME OF REQUESTOR:

Julie Iadanza

1. NAME OF AD AGENCY:

Target Enterprises LTD

15260 Ventura Blvd. #1240

Sherman Oaks, CA 91403

818.905.0005

2. ORGANIZATION PAYING FOR TIME:

**NO ON 37: Coalition Against the Deceptive Food
Labeling Scheme**

1121 L. St., Suite 803

Sacramento, CA 95814

800.331.0850

Robert C. Deis, Campaign Manager

3. ORGANIZATION PROVIDING COMMERCIAL

Same

4. BROADCAST TO FAVOR ISSUE/BALLOT/CANDIDATE:

BALLOT - No on 37

5. PRODUCT OR CATEGORY: (circle or highlight)

6. POLITICAL PARTY OR OFFICIAL AFFILIATION:

7. DATE OF REQUEST

7/31/12

8. NATURE OF REQUEST:

Granted

(a) Request for Legally Qualified Candidate

(b) Request for ISSUE card

(c) Other request or notes as stated below

local or state legally qualified candidate	Federal Candidate	Issue Advocacy, Other Non- Candidate X
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Requesting political rate card all dayparts, all programs, all levels rates :30's.

9. DISPOSITION MADE OF REQUEST

(a) Granted

(b) Denied (reason)

(c) Withdrawn (reason)

(d) Avails offered

X

X

10. SUBSEQUENT DEVELOPMENTS

Not applicable due non-Federal; non-National

11. AMOUNT OF CHARGES – see order (s) under candidate name in public file folder. If appropriate. Please note that local/state issues that are not related to matters of national significance, the support or opposition of a FEDERAL CANDIDATE or national interest will include this POLITICAL FORM and DISCLOSURE information, sans orders not required for file. Please contact the Political Specialist for additional inquiry.

CBS EMPLOYEE COMPLETING FORM

Signature: _____

name typed: _____

completing form: _____

Cheryl Ciccone, KCBS Political Specialist

Katrina Battle for Ciccone, 9/14/12